

REQUEST FOR FUNDING ANNOUNCEMENT
FOR
Grant to Pilot School Focused Prevention Program
RFF2013-06

This is a Request for funding announcement (RFF) issued by the Family and Social Services Administration Division of Mental Health and Addiction, Office of Recovery, Integration, Prevention, and Policy; Bureau of Mental Health Promotion and Addictions Prevention. For more information about the Indiana prevention system please see: <http://www.in.gov/fssa/dmha/4484.htm>.

This RFF is intended to publicize the availability of a grant opportunity for services described herein. Neither the issuance of this RFF nor the receipt of any responses thereto, shall create any obligation to the State of Indiana to make any award pursuant hereto. The award of any grant(s) as a result of this RFF shall be at the sole discretion of FSSA. Neither this RFF nor any response (“proposal”) submitted hereto are to be construed as a legal offer.

CONFIDENTIAL INFORMATION

Potential respondents are advised that materials contained in proposals are subject to the Indiana Public Records Act, IC 5-14-3 *et seq.*, and after the grant award may be viewed and/or copied by any member of the public, including news agencies and competitors. Potential respondents claiming a statutory exception to the Indiana Public Records Act must place all confidential documents in a sealed envelope clearly marked “Confidential” and must indicate on the outside of their proposal envelope that confidential materials are included and, in their cover letter, specify which statutory exception provision applies. The State reserves the right to make determinations of confidentiality. If the State does not agree that the information designated is confidential under one of the disclosure exceptions to the Public Records Act, it may either reject the proposal or discuss its interpretation of the allowable exceptions with the respondent. If agreement can be reached, the proposal will be considered. If agreement cannot be reached, the State will remove the proposal from consideration for award and return the proposal to the respondent upon request. The State will not determine price to be confidential information.

PURPOSE

The purpose of this RFF is to obtain providers to address the State’s need to provide quality evidence-based substance abuse prevention and mental health promotion services. Funding under this RFF is intended to support the implementation of school driven evidence-based prevention programs and social services to elementary and high-school children, parents, caregivers, teachers, and the community to prevent substance abuse, promote healthy behaviors, and maximize student success.

COMPENSATION

The total funds available for this RFF are \$500,000 annually for SFY 14 and SFY 15. DMHA anticipates funding one award. The grant award for this program is subject to budgetary exigencies associated with the availability of State funding.

PAYMENT STRUCTURE

If an award is received, payment will be made based on a monthly process. The grantee will be responsible for submitting claims on a monthly basis and should expect to receive payment for these claims 30-45 days after submission.

It is possible to receive start-up funds up to 1/6 of the total amount awarded for the year. In order to receive start-up costs, a grantee must revise their original proposals according to any special conditions given in their notice of award from DMHA.

Funds will be deposited electronically in the account of the entity whose name appears on the contract. It is the responsibility of the contractor to provide fiscal management of the funds and ensure that subcontractors and fiscal agents (if applicable) receive payment.

TERMS

This agreement shall be for a period of eighteen months commencing on **November 1, 2013** (or from date of final State approval of grant), and terminating on **June 30, 2016**.

PROPOSALS

Respondents interested in providing these services to FSSA/DMHA should submit proposals in the following manner in electronic format to:

Email Address: prevention.fssa@fssa.in.gov

The application must be assembled in the following manner:

1. A cover letter of application from the Director or agency board president identifying the amount of funds requested.
2. Contact Form (Attachment B)
3. Narrative
4. Work Plan
5. Templates from Attachment D
6. Budget Form (Attachment C) and Justification
7. Supporting Documents

Note: Narrative and Work plan combined may not exceed (20) pages.

Proposals, electronic, must be received no later than 5:00 p.m. Eastern Time on **September 23, 2013**. Proposals received after 5:00 p.m. will not be considered. Proposals must be delivered in electronic format with all appropriate forms and the subject heading of the electronic mail should state: **“RFF 2013-06 Proposal”**.

RESPONSE TO RFF 2013-06

QUESTIONS

Any questions regarding this RFF must be submitted in **electronic format** to prevention.fssa@fssa.in.gov no later than 1:00 p.m. Eastern Standard Time on **August 23, 2013**. Questions received after 1:00 p.m. may not be considered. Please keep questions brief and of high

priority. All questions and responses will be posted to the DMHA Prevention website at: <http://www.in.gov/fssa/dmha/4484.htm> on **August 30, 2013**.

All inquiries are only to be sent to the email address above and are not to be directed to any other staff member of FSSA. Such action may disqualify respondent from further consideration for a grant as a result of this RFF.

SCOPE OF WORK

Overview: It is the intent of FSSA/DMHA to contract with vendor(s) to provide quality substance abuse prevention and mental health promotion services for Family and Social Services Administration, Division of Mental Health and Addiction. Activities proposed should meet the needs of the population identified by the grantee in order to decrease risk factors and increase protective factors with the outcome of the prevention of drug and alcohol related problems, promotion of health behaviors, and increased student success. Examples of potential outcomes may include but are not limited to:

reduced expulsions, reduced truancy, reduced student policy violations, reduced frequency of self report of substance use, a decrease in self report of number of days feeling depressed or experiencing emotional difficulties, increased perceived risk of harm of substance use, increased days of feeling physically healthy, etc.

The respondent should use data to support the selection of the target population, identified risk or protective factors, and proposed strategies. Indiana public or private schools, school corporations, local education agencies (LEAs) and social service agencies are eligible to apply for these funds for school driven prevention efforts and must demonstrate partnerships with local Systems of Care governance and/or Local Coordinating Councils. If applicable, the respondent should identify whether the proposal has been informed using a strategic plan developed for the community under the Strategic Prevention Framework State Incentive Grant, the Communities that Care Project, the Drug Free Communities Program, or a Comprehensive Community Plan.

Description of Need: Indiana's State Epidemiological Outcomes Workgroup (SEOW) publishes the State Epidemiological Profile on an annual basis, updating all data on consumption and consequences of substance use. This includes a ranking of Indiana counties on the severity/impact of alcohol and other drug abuse, using a highest-need/highest-contributor model. For the most recent report please see: <http://www.healthpolicy.iupui.edu/PubsPDFs/2012%20State%20Epidemiological%20Profile.pdf> Applicants should also include data related to mental health and student achievement.

TIME FRAME:

<i>August 15, 2013</i>	RFF sent to potential applicants
<i>August 23 2013</i>	RFF questions due
<i>August 30, 2013</i>	RFF questions answered
<i>September 23, 2013</i>	Proposals Due
<i>September 30, 2013</i>	Notification of Awards
<i>November 1, 2013</i>	Start Date

SCOPE OF PROJECT:

Applicants may submit proposals for the delivery of school driven evidence-based prevention programs and initiatives and social services to elementary and high-school aged children, parents, caregivers, teachers, and the community to prevent substance abuse, promote healthy behaviors, and maximize student success. Applicants are encouraged to demonstrate partnerships with local Systems of Care governance and/or the Local Coordinating Council (LCC). Proposals must demonstrate comprehensive approaches engaging multiple partners and community efforts. While proposals may include universal, selective, or indicated strategies, priority will be given to those programs that focus on a selective or indicated population. The focus of this funding opportunity is the prevention of substance abuse, healthy behaviors and student success. Applicants may address such activities as violence and bullying prevention, mental health promotion and screening, and family management due to the shared risk factors between these activities and future substance use. The relatedness of these problem behaviors is due to the common risk factors within the family, peers, and individuals themselves. Good family management, close parent-child relationships, strong social skills, and solid academic performance lessen the likelihood of substance use and bullying as well as encourage good mental health. Applicants should demonstrate how addressing these related issues directly address the risk factors present in their community contributing to substance abuse. Applicants should review evaluation criteria when completing the proposal. A list of federal registries of evidence-based programs is available at <http://www.drugs.indiana.edu/spf/page.php?category=Planning#Evidence-based-Prevention-Strategies-tab>

TARGET POPULATION:

Applicants may identify target populations as supported by data. The State desires to provide a variety of evidence-based universal, selective, and indicated prevention services. Potential target populations must include elementary and/or high school students and their parents, caregivers, teachers, and the community at varying levels of risk.

The proposal should include a clear description of how the applicant will provide services for eligible project participants who are members of groups that have been traditionally under-represented, including members of racial or ethnic minority groups. The applicant should ensure that participants who are otherwise eligible to participate are selected without regard to race, color, national origin, gender, age, or disability.

ELIGIBLE APPLICANTS:

1. Indiana public or private school, school corporations or local education agency (LEA) or local social-service agencies.

BUDGET:

Potential respondents shall develop a budget appropriate to their organization's capabilities to deliver quality services. Submitted budget amount is subject to review by the *Division of Mental Health and Addiction* and can be modified for those respondents selected to receive an award.

DMHA will withhold ten percent (10%) of the total amount of the grant award until receipt of a final report documenting the enumerated performance objectives.

ALLOWABLE COSTS:

Allowable costs include those identified in OMB Circular A-122. Allowable costs include the following:

1. Staff costs, including salary, fringes, and contracted positions
2. Staff training costs: includes costs associated with training activities relevant to the project
3. Substitute teacher pay associated with training and project activities
4. Travel costs
5. Administrative costs: i.e., facility costs, equipment, phone, internet
6. Program implementation and training costs
7. Evaluation costs
8. Outreach and Marketing

Projects that target mental health promotion or substance abuse/addiction prevention are allowable. Mental health promotion, violence prevention, and family management activities will be allowed if they address risk factors related to substance abuse in the community.

Treatment, therapy, and recovery support activities cannot be funded under this RFF.

SUPPLANTING:

Funds under this grant announcement must be used to supplement existing funds for program activities and must not replace those funds that have been appropriated for the same purpose. Funds cannot be used to supplant state, federal, or local funds. Each applicant must attest that the proposed activities are not supplanting current funding. The review committee may disqualify applicants who cannot adequately distinguish that they are not supplanting or blending funding streams.

SELECTION PROCESS AND CRITERIA

To be eligible to apply for this grant award, organizations must possess the following characteristics:

1. Must be constituted as a public or private educational organization or social services agency in Indiana.
- Selected strategy must be a recognized evidence-based program according to the criteria for evidence-based strategies as set forth by SAMHSA, criteria numbers 1 or 2 only. Criteria numbers 1 and 2 are as follows:
 - It is included in Federal registries of evidence-based interventions.
 - It is reported (with positive effects on the primary targeted outcome) in peer-reviewed journals.

The full SAMHSA criteria are available at <http://captus.samhsa.gov/prevention-practice/defining-evidence-based/samhsa-criteria>.

2. Must affirm and be willing to collect all program data, adhere to data guidelines, and participate in program evaluation.
3. Previous success or experience as a DMHA grantee may also be taken into consideration.

Proposals will be reviewed and scored by a committee selected by the DMHA. The scores of each grant applicant will be averaged into a final score. Final selection of the grant awards, however, will be made by the Division Director or designee. The procedure for evaluating the proposals against the evaluation criteria will be as follows:

1. Each proposal will be evaluated on the basis of the categories listed below. A point score will be established for each response in each category.
2. Based on the results of the evaluation, the proposals determined to be most advantageous to the Target Population, taking into account all of the evaluation factors, may be selected by the State for further action.

EVALUATION CRITERIA

Proposals will be evaluated based upon the proven ability of the respondent to satisfy the requirements of the proposal in a cost-effective manner. Additional items that will be taken into consideration during evaluation include:

- The extent to which the plan of management ensures proper and efficient administration of the project
- Overall quality of the design of the project
- The quality and adequacy of the applicant's plan to use its resources and personnel to achieve each objective.

Additional consideration may be given to applicants who target higher risk groups, traditionally underserved populations, or utilize selective or indicated strategies.

Specific criteria for evaluation are:

1. **Eligibility** All eligibility criteria as outlined above must be met. Applicants not meeting all criteria may not be further evaluated and will not be considered for award.
2. **Budget (15 points)**
 - a. The budget is adequate to support the project.
 - b. Costs are reasonable in relation to the objectives of the project.
 - c. Budget narrative clearly describes how funds will be spent.

Criteria 3-8 below are based on the Strategic Prevention Framework and will be determined primarily from the narrative portion of the proposal. The points awarded for these criteria will be determined according to the following standards:

- **0-25% of maximum assigned points:** *Criteria is not met or significant information is missing from the proposal*
- **25-75% of points:** *Minimum criteria is met but there may be other projects that more adequately fulfill the criteria, and modification or clarification may be needed from the respondent to determine adequacy*
- **75-100% of points:** *Criteria is clearly and adequately met*

3. **Assessment (15 points)**

The applicant:

- a. Provides clear description of demographics for the area/population to be served
- b. Identifies the need in the community that the proposed project will address with clear support of data
- c. Identifies a risk or protective factor that represents the identified need
- d. Demonstrates that existing resources and services are not enough to fulfill the need
- e. Identifies benefits of the need being met through the proposed project

4. **Capacity (15 points)**

The proposal clearly demonstrates the following:

- a. Resources that will be utilized for the project, including accessibility of facilities, equipment, and supplies, are adequate.
- b. The organization possesses sufficient ability and readiness to implement the program as intended; the organization has experience relevant to the project.
- c. Qualifications, experience, and abilities of management and key staff are adequate and relevant to the project.
- d. The amount or percentage of time key personnel will commit to the project is adequate.
- e. Community partnerships crucial to the implementation of the project are established; the project will be readily accepted in the community.

5. Planning (20 points)

- a. Work plan goals, objectives, and action steps are specific, feasible, and measurable.
- b. Timeline is reasonable and complements the work plan. Dates, goals, and responsible parties are made clear.
- c. Proposed strategies or programs logically address the identified need in the community and fulfill the purpose of the grant.
- d. Applicant has thoroughly demonstrated that the strategies suggested meet SAMHSA criteria numbers 1 or 2 as an evidence-based practice.

6. Implementation (30 points)

- a. The proposal includes plans to ensure that evidence-based programs will be implemented with maximum fidelity. Any anticipated adaptations are justified and will not adversely affect the intended outcomes of the program.
- b. Description of the program is clear and gives a detailed picture of how the program will be implemented.
- c. The number of people to be served is reasonable in comparison to the scope and nature of the project.
- d. Work plan includes detailed discussion of activities for an 18 month project (January 1, 2014 – June 30, 2015).

7. Evaluation (5 points)

- a. Evaluation plan is reasonable and clearly identifies how evaluation of process and outcomes will be conducted.
- b. Budget and evaluation plan include the use of an outside evaluator. An outside evaluator may be used to further develop an evaluation plan, evaluate and analyze data, and/or assist the grantee in evaluation the program and outcomes.

8. Cultural Competency and Sustainability (5 points)

The proposal clearly demonstrates the following:

- a. The needs of the targeted population, including ethnic, language, and cultural needs, are clearly met by the project.
- b. People who are representative of the population being served are being fully included in the planning/ administration/ implementation of strategies.
- c. Outcomes of the project are sustainable and the agency offers specific, reliable ways of sustaining them.

9. Bonus Points Awarded

- a. Proposed project is a selective strategy; project targets persons who are at higher risk than average for mental health or substance use problems (5 bonus points)
- b. Proposed project is an indicated strategy; project targets persons who have begun to show signs of a behavioral disorder but do not meet the criteria to be diagnosed. (10 bonus points) Attachment A

Form of Proposal
Checklist

PROPOSAL CHECKLIST <i>*All items required to be considered for award. Please see evaluation criteria for additional considerations in determining award.</i>	
I. Cover Letter	<input type="checkbox"/>
II. Contact Form (Attachment B)	<input type="checkbox"/>
III. Narrative:	<input type="checkbox"/>
A. Location and Community Demographics	<input type="checkbox"/>
B. Identification of problem area and risk or protective factors through use of data	<input type="checkbox"/>
C. Previous and current prevention strategies in community and what risk factors they address	<input type="checkbox"/>
IV. Work Plan:	<input type="checkbox"/>
A. History of Agency/Organization	<input type="checkbox"/>
B. Identification of target population	<input type="checkbox"/>
C. Proposed strategies to address risk or protective factors	<input type="checkbox"/>
D. Detailed process for implementing strategies	<input type="checkbox"/>
E. Completion of Strategies Template (Attachment D)	<input type="checkbox"/>
F. Completion of Timeline Template (Attachment D)	<input type="checkbox"/>
V. Budget	<input type="checkbox"/>
A. Brief narrative describing justification for use of funds	<input type="checkbox"/>
B. Completion of Budget Forms (Attachment C)	<input type="checkbox"/>
VI. Personnel/Community Partnerships	<input type="checkbox"/>
A. Identification of role and responsibilities for each individual who will contribute to this proposed project	<input type="checkbox"/>
B. Completion of Key Personnel Template (Attachment D)	<input type="checkbox"/>
C. Completion of Community Partnerships Template (Attachment D)	<input type="checkbox"/>
D. MOU's for community partnerships involved in implementation (Must include a letter of support from local Systems of Care governance and/or Local Coordinating Council.	<input type="checkbox"/>

ATTACHMENT B
RESPONDENT INFORMATION

AGENCY INFORMATION
1) Legal Name:
2) Doing Business As (if different than legal name):
3) Address:
County:
4) Email Address:
5) Telephone:
6) Director Name/Title:
8) Counties to Be Served:
9) Taxpayer Identification Number ¹ :
10) DUNS Number ² :

APPOINTED CONTACT FOR GRANT
Contact Name:
Email:
Telephone:

RESPONDENT INFORMATION

- 1) Type of Organization:
- 2) ATTACH Proof of Non-Profit Status - 501(c) (3) CERTIFICATE

SIGNATURE OF AUTHORIZED REPRESENTATIVE:

To the best of my knowledge and belief, the information in this proposal has been duly authorized by the governing body of the applicant.

SIGNATURE:
NAME/TITLE: (Typed)
DATE SIGNED:

¹ Employer I.D. number or Social Security number, as appropriate, whichever is used for Federal Income Tax purposes.

² DUNS Number is required to complete the State contracting process. A DUNS Number can be obtained for free at <http://www.dnb.com/get-a-duns-number.html>

ATTACHMENT C

Budget Summary

Respondent Name: _____

Twelve Month Figures (100%)

	AMOUNT REQUESTED
Personnel	
1) Staff Salaries	
2) Staff Fringes	
Non-Personnel	
3) Staff Travel	
4) Staff Training	
5) Equipment	
6) Participant Travel	
7) Other	
*****	*****
Total Project Costs (100%) (1+2+3+4+5+6+7)	

State will provide reimbursement for 100% of cost.

ATTACHMENT C
Personnel Budget
Staffing Detail Sheet

Respondent Name: _____

Staff Position *	(100%) Salary (a)	(100%) Fringe Benefits (b)**	% of Time on Project (c)	Total Amount of Salary Requested (a x c)	Total Amount of Benefits Requested (b x c)
TOTAL					

Salary and fringes are to be shown as 12 month figures

* Include Job Description for each staff position

SALARIES: Show title, salary, and time commitment for all staff positions under this project. Staff positions must be new positions. If existing staff are hired for these positions, their previous positions must be filled by a new staff position.

** Include detail of Fringe Benefit amounts

FRINGE BENEFITS: Include contributions for Social Security, employee insurance, pension plans, etc.

ATTACHMENT C
Non-Personnel Budget
Travel Detail Sheet

Respondent Name: _____

[illegible]

* TRAVEL includes travel related to grant staff travel for client services and can include travel, per diem, and overnight accommodations.

Reimbursement for travel cannot exceed the allowable state reimbursement rates for travel, per diem and overnight accommodations.

Travel related to staff training must be included under Training.

NOTE: Use additional sheets as needed. (Number each additional page.)

ATTACHMENT C
Non-Personnel Budget
Training Detail Sheet

Respondent name: _____

[illegible]

NOTE: Use additional sheets as needed. (Number each additional page.)

Identify each training activity and persons involved. Reimbursement for travel, per diem and overnight accommodations cannot exceed the allowable state reimbursement rate (see enclosed). Food and drink expenses are not an allowable cost unless they can be covered under per diem.

For consultant expenses, give the total number of consultants that will work on the project and their costs (fees, per diem, and travel). Provide the basis for the determination of the rate identified for consultant costs for which Federal funds are requested. The justification should demonstrate how the consultant costs are reasonable, customary, and consistent with the established institutional/organizational/agency policy governing consultant costs.

ATTACHMENT C
Non-Personnel Budget
Equipment Detail Sheet

Respondent name: _____

Item Description	Quantity (a)	Estimate (100%) Cost Per Item (b)	Total (100%) Cost (a x b)	% Assigned to Project	Total Funds Requested
TOTAL					

List non-expendable personal property that has an acquisition of \$50.00 or more.

NOTE: Use additional sheets as needed. (Number each additional page.)

NARRATIVE JUSTIFICATION FOR EQUIPMENT:

Submit detailed justification for each equipment item and how it will be used to achieve objectives of the project.

Respondent Name: _____

Total

ATTACHMENT C
Non-Personnel Budget
Other

Respondent name: _____

[illegible]

ATTACHMENT D
Templates
Strategy Template

Strategy	Risk/ Protective Factor	Target Population	Universal, Selective, Indicated	Number served	Evidence –Based?	Proposed Outcomes

Instructions

Strategy: Name of the proposed strategy or program

Risk/ Protective Factor: The risk or protective factor identified above must address an area of need in your community, and data supporting this should be included in the proposal. A **risk factor** is a factor that has been shown to increase the likelihood that a person will develop a mental or substance use disorder. A **protective factor** is a factor that has been shown to decrease the likelihood that a person will develop a disorder even in the presence of risk.

Target Population: The population being served with the proposed project, including age, culture, geographic area or other defining characteristics of the population being served.

Universal, Selective, or Indicated: Identify the appropriate category for the proposed strategy using the following criteria:

- Universal: Targeted to the general public or a whole population group that has not been identified on the basis of individual risk
- Selective: Targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly higher than average
- Indicated: Targeted to individuals in high-risk environments, identified as having minimal but detectable signs or symptoms foreshadowing disorder or having biological markers indicating predisposition for disorder but not yet meeting diagnostic levels

Number of people served: Number of people expected to be directly served by the program for the year

Evidence-based?: Strategies chosen must either be listed in a federal registry of programs or have ample evidence supporting its effectiveness documented in peer-reviewed journals, as laid out in the SAMHSA Criteria for Evidence-Based Interventions criteria 1 and 2 (<http://captus.samhsa.gov/prevention-practice/defining-evidence-based/samhsa-criteria>). Strategies meeting criteria 3, but not meeting criteria 1 or 2, will not be considered for award under this RFF.

Proposed outcomes: Specific outcomes expected from implementation that affect the identified risk and protective factors. Additional major outcomes associated with the strategies may also be included.

ATTACHMENT D
Templates
Community Partnerships Template

The community partnerships template should identify key community organizations that support the implementation of the proposed project and how that support will be offered.

Community Organization Name	Organization Contact: Title, Name, Phone, Email	Target Population Served	Support Roles
1.	Title: Name: Phone: Email:		
2.	Title: Name: Phone: Email:		
3.	Title: Name: Phone: Email:		

Key Personnel Template

The following chart is to be used to identify the key personnel needed for full implementation of the proposal. Provide the position title, a detailed description of the position's roles and responsibilities, and the percentage of time this person will be devoting to the proposed project.

Position Title	Roles and Responsibilities known	%FTE
1.		
2.		
3.		
4.		
5.		

ATTACHMENT D
Templates
Timeline Template

Use the below template to map out the process for implementing the proposed project. This should represent a general timeline and pieces of it may change throughout the course of the project depending on training and community readiness needs.

	Date	Action to Be Completed	Responsible Parties
Quarter 1 (July, Aug, Sep)			
Quarter 2 (Oct, Nov, Dec)			
Quarter 3 (Jan, Feb, Mar)			
Quarter 4 (Apr, May, June)			

